

RECEIVED
CENTRAL FAX CENTER

OCT 18 2007

FAX TRANSMISSION

DATE: October 18, 2007

PTO IDENTIFIER: Application Number 10/657,383
Patent Number

Inventor: Chang et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: ROPES & GRAY LLP

Jesse A. Fecker, Ph.D.

PHONE: (617) 951-7633

Attorney Dkt. #: 104831-0002-103

PAGES (Including Cover Sheet): 4

CONTENTS:

Fee Transmittal (1 page)
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Request for Continued Examination Transmittal (1 page)
This Facsimile Cover Sheet (1 page)
Charge \$930.00 to deposit account 18-1945

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 951-7633 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

ROPS & GRAY LLP
One International Place, Boston, Massachusetts 02110
Telephone: (617) 951-7000 Facsimile: (617) 951-7050

RECEIVED
CENTRAL FAX CENTER

OCT 18 2007

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
Fee TRANSMITTAL For FY 2008		Application Number	10/657,383
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	September 8, 2003
		First Named Inventor	Yan Chang
		Examiner Name	L. C. Maier
		Art Unit	1623
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No. 104831-0002-103	

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number: 18-1945		Deposit Account Name: Ropes & Gray LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments			

FEES CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>
Utility	310	155	510	255	210	105	_____
Design	210	105	100	50	130	65	_____
Plant	210	105	310	155	160	80	_____
Reissue	310	155	510	255	620	310	_____
Provisional	210	105	0	0	0	0	_____
2. EXCESS CLAIM FEES							
<u>Fee Description</u>							
Each claim over 20 (including Reissues) _____							
Each independent claim over 3 (including Reissues) _____							
Multiple dependent claims _____							
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
_____	_____	_____	_____	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____	
HP = highest number of total claims paid for, if greater than 20. _____							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____			
_____	_____	_____	_____	_____			
HP = highest number of independent claims paid for, if greater than 3. _____							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fees Paid (\$)</u>		
- 100 =	/50 =	(round up to a whole number) x	_____	=	_____		
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount) _____							
Other (e.g., late filing surcharge): 2253 Extension for response within third month _____							
2801 Request for continued examination (RCE) (see 37 ...)							
<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	525.00					
		405.00					

SUBMITTED BY					
Signature			Registration No. (Attorney/Agent)	52,883	Telephone (617) 951-7633
Name (Print/Type)	Jesse A. Fecker, Ph.D.		Date	October 18, 2007	

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: October 18, 2007

Signature: (Mary Jane DiPalma)